

Alternative Assessment of Oral Health Disparities

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What can be gained?

- Traditional approach with surveys
 - Prevalence estimates
 - Risk estimates
 - No attributable risk
- Alternative/additional approach
 - Improved description of the inequality
 - Quantification of the inequality



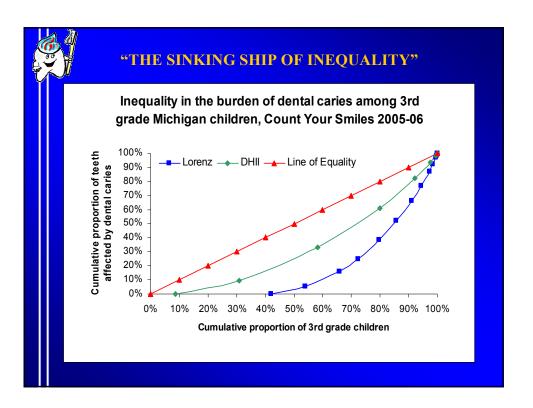
Mean DMFT and the SiC

- Mean DMFT
 - Average number of carious teeth
- Significant Caries Index (SiC)
 - WHO, goal of 3.0 teeth
 - Mean DMFT of bottom one-third
 - http://www.whocollab.od.mah.se/expl/siccalc ulation.xls



The Lorenz Curve

- Plot of cumulative proportion of disease versus cumulative proportion of population
- · Leads to statements such as...
 - 28% of Michigan children bear 75% of the caries burden
 - 13% of Michigan children bear 80% of untreated decay





Calculating Gini and DHII

- · Gini coefficient
 - Proportion of area between the line of equality and the Lorenz curve out of the area under the line of equality
 - Calculus flashback...sum the trapezoids!
 - Limitation based on continuous distribution
- Dental Health Inequality Index (DHII)
 - Same principle as Gini
 - Transform the line of equality for count data



Transforming the Line of Equality

- P(tooth had caries)
 - Number of carious teeth
 - Number of examined teeth
- P(child had DMF = X)
 - Calculate the proportion of persons that should have X number of carious teeth
- Plot the new distribution and calculate DHII
 - Once again, fun with summing trapezoids
 - Proportion of area between the new line of equality and the Lorenz curve out of area under line of equality



Caries Inequality in Michigan, 2005-06

Region	Caries Experience (%)	Mean DMFT (Teeth)	SiC Index (Teeth)	DHII	Proportion with 80% of caries burden
Upper Peninsula	70%	3.16	6.93	0.334	38%
Northern Lower Peninsula	66%	3.09	7.06	0.391	37%
Southern Lower Peninsula	62%	2.41	5.75	0.389	33%
Suburban Detroit	48%	1.61	4.34	0.492	26%
Detroit	63%	2.35	5.37	0.345	38%
Michigan	58%	2.20	5.47	0.438	32%



Public Health Implications

- Population-based versus targeted public health approaches
- · Reducing disease or reducing disparities?
- Monitor inequality changes over time to help evaluate programs



References

- Antunes JLF, Narvai PC, Nugent ZJ. Measuring inequalities in the distribution of dental caries. Community Dentistry & Oral Epidemiology. 2004; 32: 41-8.
- Nugent ZJ, Longbottom C, Pitts NB. Quantifying dental inequality developing the methodology. *Community Dental Health*. 2002; 19: 43-5.
- Lee W. Characterizing exposure-disease association in human populations using the Lorenz curve and Gini index. *Statistics in Medicine*. 1997; 16: 729-39.